Case 19-20912-GLT Doc 18 Filed 04/01/19 Entered 04/01/19 14:09:22 Desc Main Document Page 1 of 51

Fill in this information to identify your case:								
Debtor 1	Kimberly E. Allen							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		WESTERN DISTRICT	OF PENNSYLVANIA					
Case number	19-20912							
(if known)	10 20012				☐ Check if this is an amended filing			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your a	i ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	80,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,450.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	102,450.00
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	131,800.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	10,374.00
	Your total liabilities	\$	142,174.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,306.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	878.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal	, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Case number (if known) 19-20912 Debtor 1 Kimberly E. Allen

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

232.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case	19-20912-G	LI DOCTO		cument Page 3 of 51	11/19 14.09.	22 D	esc Main
Fill in this infor	mation to identify	your case and th					
Debtor 1	Kimberly E.		`				
	First Name		Name	Last Name			
Debtor 2	First Name	NA:-J-II-	None	Local Name			
(Spouse, if filing)	First Name	Middle	Name	Last Name			
United States Ba	ankruptcy Court for	the: WESTERN	DISTR	ICT OF PENNSYLVANIA			
Case number	19-20912						Check if this is an amended filing
	orm 106A/B le A/B: Pr	-					12/15
think it fits best. E information. If moi Answer every que	Be as complete and a re space is needed, a stion.	ccurate as possibl attach a separate sl	e. If two heet to t	only once. If an asset fits in more than one married people are filing together, both are his form. On the top of any additional pages Estate You Own or Have an Interest In	equally responsible	e for supp	lying correct
☐ No. Go to Pa Yes. Where							
1.1			What	is the property? Check all that apply			
	gray Street			Single-family home	Do not deduct sec	ured claim	s or exemptions. Put
Street address	, if available, or other desc	cription		Duplex or multi-unit building Condominium or cooperative			laims on Schedule D: Secured by Property.
Pittsburg	h PA	15207-0000		Manufactured or mobile home Land	Current value of entire property?	ı	Current value of the portion you own?
City	State	ZIP Code		Investment property	\$50,00).00	\$50,000.00
				Timeshare Other			r ownership interest
				has an interest in the property? Check one	a life estate), if k		cy by the entireties, or
				Debtor 1 only			
Alleghen	у			Debtor 2 only			
County				Debtor 1 and Debtor 2 only			unity property
				At least one of the debtors and another	(see instruction		
			Othe	r information you wish to add about this ite	m, such as local		

Official Form 106A/B Schedule A/B: Property page 1

property identification number:

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If you		Allen				ise number (if known)	19-20912
11 900	own or have	e more	than one, lis	t here:			
.2					t is the property? Check all that apply		
	oodside Driv				Single-family home	Do not deduct secu	red claims or exemptions. Put
Street ac	ddress, if available, o	or other des	scription		Duplex or multi-unit building	,	secured claims on Schedule D: e Claims Secured by Property.
				П	Condominium or cooperative	Creditors vino riav	e ciains secured by i roperty.
				_			
				Ц		Current value of th	ne Current value of the
Mc D	onald	PA	15057-0000		Land	entire property?	portion you own?
City		State	ZIP Code		Investment property	\$30,000	.00 \$30,000.00
						Describe the natur	re of your ownership interest
					Other	_ (such as fee simpl	le, tenancy by the entireties, o
				Who	has an interest in the property? Check one	a life estate), if kno	own.
					Debtor 1 only		
Wash	ington			□	Debtor 2 only		
County					Debtor 1 and Debtor 2 only	Check if this i	is community property
					At least one of the debtors and another	(see instructions)	
					r information you wish to add about this i	item, such as local	
					erty identification number: pile Home and 3 lots		
				IVIOL	one nome and 3 lots		
					your entries from Part 1, including a		\$80,000.00
pages y	you have attac	hed for	Part 1. Write t	hat numbe	er here	=>	Ψου,ουο.ου
art 2: Des	cribe Your Vehi	cles					
□ No							
□ No ■ Yes							
■ Yes	: Kia			Who has a	an interest in the property? Check one		ured claims or exemptions. Put
■ Yes 3.1 Make	0)		_		the amount of any	ured claims or exemptions. Put secured claims on <i>Schedule D:</i> <i>ie Claims Secured by Property</i> .
■ Yes	Sorrento)		■ Debtor	1 only	the amount of any s Creditors Who Hav	secured claims on Schedule D: ve Claims Secured by Property.
Yes 3.1 Make Mode Year:	Sorrento)	100000	■ Debtor	1 only 2 only	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
Yes 3.1 Make Mode Year: Appro	Sorrento 2011)	100000	■ Debtor □ Debtor □ Debtor	1 only	the amount of any creditors Who Hav	secured claims on Schedule D: ve Claims Secured by Property. he Current value of the
Yes 3.1 Make Mode Year: Appro	Sorrento 2011 eximate mileage:) 	100000	☐ Debtor ☐ Debtor ☐ Debtor ☐ At least	1 only 2 only 1 and Debtor 2 only one of the debtors and another	the amount of any creditors Who Hav Current value of tentire property?	secured claims on Śchedu ye Claims Secured by Prop he Current value of portion you own
Yes 3.1 Make Mode Year: Appro Other	Sorrento 2011 eximate mileage: r information:	otor hom	nes, ATVs and	Debtor Debtor Debtor At least Check (see inst	1 only 2 only 1 and Debtor 2 only	the amount of any Creditors Who Have Current value of the entire property? \$19,000	secured claims on Schedule Leve Claims Secured by Property he Current value of the portion you own?
Yes 3.1 Make Mode Year: Appro Other Watercra Examples No Yes Add the pages year.	Sorrento 2011 eximate mileage: r information: aft, aircraft, mo Boats, trailers dollar value o ou have attach	otor hom , motors f the po ned for F	nes, ATVs and , personal wate rtion you own Part 2. Write th	Debtor Debtor Debtor At least Check (see inst other recrearcraft, fishi	1 only 2 only 1 and Debtor 2 only 2 one of the debtors and another if this is community property tructions) reational vehicles, other vehicles, and	the amount of any Creditors Who Have Current value of the entire property? \$19,000 d accessories accessories	secured claims on Schedule D: ye Claims Secured by Property. he Current value of the portion you own?
Yes 3.1 Make Mode Year: Appro Other Watercra Examples No Yes Add the pages yeart 3: Des	Sorrento 2011 eximate mileage: r information: aft, aircraft, mo Ex Boats, trailers dollar value o ou have attach	otor hom , motors f the po ned for F	nes, ATVs and , personal wate rtion you own Part 2. Write th	Debtor Debtor Debtor At least Check (see insi other recreaft, fishi	1 only 2 only 1 and Debtor 2 only 1 one of the debtors and another if this is community property tructions) reational vehicles, other vehicles, and ng vessels, snowmobiles, motorcycle a	the amount of any Creditors Who Have Current value of the entire property? \$19,000 d accessories accessories	secured claims on Schedule D: re Claims Secured by Property. he Current value of the portion you own? .00 \$19,000.0
Yes 3.1 Make Mode Year: Appro Other Watercra Examples No Yes Add the pages yeart 3: Des	Sorrento 2011 eximate mileage: r information: aft, aircraft, mo Ex Boats, trailers dollar value o ou have attach	otor hom , motors f the po ned for F	nes, ATVs and , personal wate rtion you own Part 2. Write th	Debtor Debtor Debtor At least Check (see insi other recreaft, fishi	1 only 2 only 1 and Debtor 2 only 2 one of the debtors and another if this is community property tructions) reational vehicles, other vehicles, and ng vessels, snowmobiles, motorcycle a	the amount of any Creditors Who Have Current value of the entire property? \$19,000 d accessories accessories	secured claims on Schedule D: re Claims Secured by Property. he Current value of the portion you own? .00 \$19,000.00

Official Form 106A/B

Schedule A/B: Property

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Case number (if known) 19-20912 Debtor 1 Kimberly E. Allen 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... \$2,500.00 Furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... \$300.00 Handgun 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No ■ Yes. Describe..... Clothing \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$150.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

for Part 3. Write that number here

\$3,450.00

Page 6 of 51 Document Case number (if known) 19-20912 Debtor 1 Kimberly E. Allen Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No Institution name: ☐ Yes..... 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

	(Case 19-20912-GLT	Doc 18		Entered 04/01/19 14:09:2 age 7 of 51	
De	ebtor 1	Kimberly E. Allen			Case number (if known)	19-20912
	Exan ■ No	ses, franchises, and other gen ples: Building permits, exclusive Give specific information abou	licenses, coo		ldings, liquor licenses, professional licens	ses
M	anov o	property owed to you?				Current value of the
IVI	oney o	property owed to you:				portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to you				
	■ No □ Yes	Give specific information about	them, includi	ng whether you already	filed the returns and the tax years	
29.	Exan ■ No	•	iony, spousal	support, child support, r	naintenance, divorce settlement, property	v settlement
	⊔ Yes	Give specific information				
30.		amounts someone owes you ples: Unpaid wages, disability in benefits; unpaid loans you			, sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes	Give specific information				
31.	_Exan	sts in insurance policies ples: Health, disability, or life ins	surance; healt	h savings account (HSA	s); credit, homeowner's, or renter's insura	nce
	■ No	Name the insurance company of	of each nolicy	and list its value		
		Company		and not no value.	Beneficiary:	Surrender or refund value:
32.	If you	nterest in property that is due y are the beneficiary of a living tru one has died.			nce policy, or are currently entitled to rec	eive property because
	■ No	Give specific information				
	□ res	Give specific information				
33.	_Exan	s against third parties, whether ples: Accidents, employment dis				
	■ No □ Yes	Describe each claim				
21			laims of ovo	ry naturo, including co	ounterclaims of the debtor and rights to	o sot off claims
J 4 .	■ No	contingent and uniquidated t	Janins of eve	ry nature, including co	differentialities of the debtor and rights to	o set on claims
	☐ Yes	Describe each claim				
35.	Any f	nancial assets you did not alre	eady list			
	☐ Yes	Give specific information				
36		-			ntries for pages you have attached	\$0.00
Pa	rt 5: D	escribe Any Business-Related Pro	perty You Own	or Have an Interest In. Li	st any real estate in Part 1.	
37		own or have any legal or equitable				
	_	o to Part 6.	- morost iii aii	., Jaoinoso-related prope	···y ·	

☐ Yes. Go to line 38.

Document Page 8 of 51 Case number (if known) 19-20912 Debtor 1 Kimberly E. Allen Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$80,000.00 56. Part 2: Total vehicles, line 5 \$19,000.00 57. Part 3: Total personal and household items, line 15 \$3,450.00 58. Part 4: Total financial assets, line 36 \$0.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$22,450.00 Copy personal property total \$22,450.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$102,450.00

Fill in this infor	ill in this information to identify your case:							
Debtor 1	Kimberly E. Allen	1						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		WESTERN DISTRICT (OF PENNSYLVANIA					
Case number	19-20912							
(if known)				☐ Check if this is an amended filing				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	? Check one only,	even if your spouse	is filing with you.
----	------------------------------------------	-------------------	---------------------	---------------------

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
17 Woodside Drive Mc Donald, PA 15057 Washington County	\$30,000.00		\$12,800.00	11 U.S.C. § 522(d)(5)
Mobile Home and 3 lots Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	
2011 Kia Sorrento 100000 miles	\$19,000.00		\$2,200.00	11 U.S.C. § 522(d)(2)
Line IIom Schedule AVD. 3.1			100% of fair market value, up to any applicable statutory limit	
Furniture Line from Schedule A/B: 6.1	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(3)
Ellie IIolii Gonedale 24B. G. I			100% of fair market value, up to any applicable statutory limit	
Handgun Line from Schedule A/B: 9.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)
Ellie IIolii Genedale 24B. G. I			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
Ellic Holli Gollegule FVD. 11.1			100% of fair market value, up to any applicable statutory limit	

Case 19-20912-GLT Doc 18 Filed 04/01/19 Entered 04/01/19 14:09:22 Document Page 10 of 51 Case number (if known) Debtor 1 Kimberly E. Allen 19-20912 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Jewelry 11 U.S.C. § 522(d)(4) \$150.00 \$150.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Desc Main

Case 1	.9-20912-GLT	Doc 18 Filed		Entered 04/01/19 e 11 of 51	14:09:22 Des	sc Main
Fill in this informa	ation to identify you					
Debtor 1	Kimberly E. Alle					
Debtor 2	First Name	Middle Name	Last Nar	ne		
(Spouse if, filing)	First Name	Middle Name	Last Nar	ne		
United States Banl	kruptcy Court for the:	WESTERN DISTRIC	CT OF PENNSYLV	ANIA		
Case number 19	9-20912					
(if known)					. –	if this is an ded filing
	D: Creditors			red by Propert		12/15
				are equally responsible for su rm. On the top of any addition		
1. Do any creditors h	ave claims secured by	your property?				
□ No. Check t	this box and submit th	nis form to the court with	your other schedul	es. You have nothing else t	o report on this form.	
■ Yes. Fill in a	all of the information	pelow.				
Part 1: List All	Secured Claims					
2. List all secured cl	laims. If a creditor has r	nore than one secured clain	n, list the creditor sepa	Column A	Column B	Column C
		a particular claim, list the of cal order according to the cr		Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Credit Acco	•	Describe the property th	at secures the claim	\$16,800.00	\$19,000.00	\$0.00
Creditor's Name	··	2011 Kia Sorrento				

25505 West 12 Mile Road, As of the date you file, the claim is: Check all that **Suite 3000** apply.

Contingent Southfield, MI 48034 Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. lacksquare An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only lacksquare At least one of the debtors and another ☐ Judgment lien from a lawsuit \square Check if this claim relates to a Auto Loan Other (including a right to offset) community debt Date debt was incurred 2014 Last 4 digits of account number

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Debtor 1 Kimberly E. Allen		Case number (if known)	19-20912	
First Name Middle N	ame Last Name			
Green Tree Servicing,	Describe the property that secures the claim:	\$90,000.00	\$50,000.00	\$40,000.00
Creditor's Name	1203 Margray Street Pittsburgh, PA 15207 Allegheny County			
P.O. Box 0049 Palatine, IL 60055-0049	As of the date you file, the claim is: Check all that apply. Contingent	_		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a community debt	Other (including a right to offset) First Mo	rtgage		
Date debt was incurred	Last 4 digits of account number 351	7		
PA Housing Finance Agency	Describe the property that secures the claim:	\$22,000.00	\$50,000.00	\$0.00
Creditor's Name	1203 Margray Street, Pittsburgh, PA 15207			
211 North Front Street Harrisburg, PA 17105	As of the date you file, the claim is: Check all that apply. Contingent	1		
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Mortgage		
Date debt was incurred	Last 4 digits of account number			
Washington County Tax Claim Bureau	Describe the property that secures the claim:	\$3,000.00	\$30,000.00	\$0.00
Creditor's Name	17 Woodside Drive Mc Donald, PA 15057 Washington County Mobile Home and 3 lots			
100 West Beau Street	As of the date you file, the claim is: Check all that	J		
Suite 205 Washington, PA 15301	apply.			
Number, Street, City, State & Zip Code	☐ Contingent			
Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)	SCOULEU		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a community debt	Other (including a right to offset) Tax Lien	1		
Date debt was incurred	Last 4 digits of account number			

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Debtor 1	Kimberly E. All	len		Case number (if known)	19-20912
	First Name	Middle Name	Last Name		
Add the	e dollar value of your	entries in Column A on t	his page. Write that number here	: \$131,800.	00
	s the last page of you hat number here:	r form, add the dollar val	lue totals from all pages.	\$131,800.	00
Part 2:	List Others to Be	Notified for a Debt Th	at You Already Listed		
trying to than one	collect from you for a	debt you owe to someo e debts that you listed in	ne else, list the creditor in Part 1	, and then list the collection ager	or example, if a collection agency is ncy here. Similarly, if you have more onal persons to be notified for any
	ame, Number, Street, C a. Housing Finan	•	(On which line in Part 1 did you ente	r the creditor? 2.3
A	ttn: Anne C. Klits .O. Box 15057	• •	I	_ast 4 digits of account number	
	arrisburg, PA 17	105-5057			
TI 13 Fi	ame, Number, Street, C he Law Offices o 310 Industrial Bo irst Floor, Suite 1 outhampton, PA	f Gregory Javardiar ulevard 01	n	On which line in Part 1 did you enteast 4 digits of account number	r the creditor? 2.2

Cas	e 19-20912-GL1	Doc 18 Filed 0		14 of 5	04/01/19 14: :1	.09.22 Desi	Civialli
Fill in this info	ormation to identify your c		II Paue	14 () 5			
Debtor 1	Kimberly E. Allen						
	First Name	Middle Name	Last Nam	e			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nam	•			
United States	Bankruptcy Court for the:	WESTERN DISTRICT O	F PENNSYLVA	NIA			
Case number	19-20912						
(if known)						-	if this is an
						amend	ed filing
Official Fo	rm 106E/F						
Schedule	E/F: Creditors W	ho Have Unsecu	red Claim	S			12/15
Schedule G: Exe	ontracts or unexpired leases t ecutory Contracts and Unexpi editors Who Have Claims Secu	red Leases (Official Form 10	6G). Do not incl	ide any cre	ditors with partially s	ecured claims that a	re listed in
	Continuation Page to this page number (if known).	e. If you have no informatior	to report in a Pa	art, do not fi	le that Part. On the to	pp of any additional p	pages, write your
Part 1: List	t All of Your PRIORITY Uns	secured Claims					
	ditors have priority unsecured	I claims against you?					
□ No. Go t	o Part 2.						
Yes.	our priority unsecured claims	If a graditar has more than a	aa priority upaaau	rad alaim lia	t the graditar congrets	ly for each claim. For	anah alaim liatad
identify wha possible, list	t type of claim it is. If a claim has t the claims in alphabetical order ore than one creditor holds a par	s both priority and nonpriority a r according to the creditor's na	amounts, list that one in the second in the ime. If you have n	claim here ar	nd show both priority a	nd nonpriority amount	s. As much as
(For an expl	lanation of each type of claim, se	ee the instructions for this form	n in the instruction	booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1 Interr	nal Revenue Service	Last 4 digits of	account number		Unknown	Unknown	Unknown
	Creditor's Name	When was the c	laht ingurrad?	2012 20	42		
_	Box 7346 delphia, PA 19101-7346		lebt ilicurreu r	2012-20	13		
Numbe	r Street City State Zip Code		ou file, the claim	is: Check a	ll that apply		
	rred the debt? Check one.	☐ Contingent					
☐ Debtor	1 only	☐ Unliquidated					
☐ Debtor	2 only	☐ Disputed					
☐ Debtor	1 and Debtor 2 only	Type of PRIORI	TY unsecured cla	aim:			
At leas	t one of the debtors and another	Domestic sup	port obligations				
☐ Check	if this claim is for a commun	ity debt Taxes and ce	rtain other debts	ou owe the	government		
Is the clai	m subject to offset?	<u> </u>			u were intoxicated		
No		Other Specif	.,				

Income Taxes

☐ Yes

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Debt	or 1 Kimberly E. Allen		Case numb	er (if known)	19-20912	
2.2	Pennsylvania Department of Revenue	Last 4 digits of account number		Unknown	Unknown	Unknown
	Priority Creditor's Name Bankruptcy Division PO Box 280946	When was the debt incurred?	2011-2014			
	Harrisburg, PA 17128-0946					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that	t apply		
	Who incurred the debt? Check one.	☐ Contingent				
	☐ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	■ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts	you owe the gove	rnment		
	Is the claim subject to offset?	☐ Claims for death or personal in	•			
	No	Other. Specify	,ja.ye yea ire.			
	☐ Yes	Income Ta	axes			
Part	2: List All of Your NONPRIORITY Unsecu	ired Claims				
3. D	o any creditors have nonpriority unsecured claim	ns against you?				
	$oldsymbol{\square}$ No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.			
	Yes.					
	ist all of your nonpriority unsecured claims in the	alubabatical auday of the avaditor	who holde cock	alaim If a aradita	r bas mars than ans n	a maria ritu
u th	ist air of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each cl nan one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify w	hat type of claim i	t is. Do not list clai	ms already included ir	Part 1. If more
'	art Z.				Total	claim
4.1	AES/PHEAA	Last 4 digits of account num	ber 0036			\$3,800.00
7.1	Nonpriority Creditor's Name		0030			ψ3,000.00
	P.O. Box 8147	When was the debt incurred?	?			
	Harrisburg, PA 17105					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cl	aim is: Check all t	inat apply		
	Debtor 1 only					
	Debtor 2 only	☐ Contingent				
	′	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsec	cured claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a report as priority claims	separation agreen	nent or divorce tha	t you did not	
	No	Debts to pension or profit-si	haring plans, and	other similar debts	;	
	☐ Yes	Other. Specify Student	•			
	□ 163	Otner. Specify Student	Loan			

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Deptor	Kimberiy E. Alien	Case number (if known) 19-20912	
4.2	American Express	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name c/o Becket and Lee, LLP	When was the debt incurred?	
	P.O. Box 3001		
	Malvern, PA 19355-0701 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.3	American Home Patient	Last 4 digits of account number	\$149.00
	Nonpriority Creditor's Name P.O. Box 927161	When upo the debt incurred? 2042	
	Philadelphia, PA 19182	When was the debt incurred? 2012	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Services	
	American InfoSource LP as agent		
4.4	for	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		
	Verizon P.O. Box 248838	When was the debt incurred?	
	Oklahoma City, OK 73124-8838		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	

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Debto	or 1 Kimberly E. Allen	Case number (if known) 19-20912	
4.5	BYL Collection Service, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$400.00
	301 Lacey Street West Chester, PA 19382	When was the debt incurred? 2012	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Medical Services Other. Specify Medical Services	
4.6	Commonwealth of Pennsylvania Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	Office of Attorney General Collections Unit	When was the debt incurred?	
	14th Floor, Strawberry Square Harrisburg, PA 17120		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.7	Credit Acceptance Corporation Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	25505 West Twelve Mile Rd Suite 3000	When was the debt incurred?	
	Southfield, MI 48034	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Debtor	1 Kimberly E. Allen	Document Page 18 of 51 Case number (if known) 19-20912	
4.8	Duquesne Light Company	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name c/o Bernstein-Burkley, P.C., 707 Grant Street, Suite 2200, Gulf Tower Pittsburgh, PA 15219	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.9	Duquesne Light Company Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00
	411 Seventh Avenue Pittsburgh, PA 15230	When was the debt incurred? 2012-2014	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Electric Bill	
4.1	ECMC	Last 4 digits of account number	\$3,600.00
	Nonpriority Creditor's Name PO Box 16478	When was the debt incurred? 2010	
	St Paul, MN 55116-0478 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Student Loan

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Debtor 1 Kimberly E. Allen ase number (if known) 19-20912 4.1 **Invision Human Services** \$256.00 Last 4 digits of account number Nonpriority Creditor's Name 12450 Perry Highway 2012 When was the debt incurred? Wexford, PA 15090 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Insurance 4.1 **Peoples Natural Gas** Unknown Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 644760 When was the debt incurred? Pittsburgh, PA 15264 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Peoples Natural Gas** Unknown Last 4 digits of account number Nonpriority Creditor's Name Attn: Cash Management Dept. When was the debt incurred? 375 North Shore Drive, Suite 600 Pittsburgh, PA 15212 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Kimberly E. Allen ase number (if known) 19-20912 4.1 Pittsburgh Water & Sewer Authority Unknown Last 4 digits of account number 4 Nonpriority Creditor's Name c/o Goehring Rutter & Boehm When was the debt incurred? 437 Grant Street, 14th Floor Pittsburgh, PA 15219 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Portfolio Investments II LLC Unknown Last 4 digits of account number 5 Nonpriority Creditor's Name When was the debt incurred? c/o Recovery Management Systems Corp. 25 SE 2nd Avenue, Suite 1120 Miami, FL 33161-1605 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Shop NBC \$131.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 6740 Shady Oak Road When was the debt incurred? 2012 Solon, OH 44139 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer Debt ☐ Yes

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Debto	or 1 Kimberly E. Allen	Document Page 21 of 51 Case number (if known) 19-20912	C Maiii
4.1 7	UPMC Community Medicine, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	P.O. Box 382046 Pittsburgh, PA 15250-8046	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	■ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 3	UPMC Magee Womens Hospital	Last 4 digits of account number	\$234.00
	Nonpriority Creditor's Name 2 Hot Metal Street Pittsburgh, PA 15203	When was the debt incurred? 2012	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	
4.1	UPMC Physician Service	Last 4 digits of account number	\$247.00
	Nonpriority Creditor's Name 1650 Metropolitan Street, 3rd Floor Pittsburgh, PA 15233	When was the debt incurred? 2008	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	

☐ Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans $\hfill\square$ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes

or 1 Kimberly E. Allen	Document Page 22 of 51 Case number (if known) 19-20912	
UPMC Physician Services	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name P.O. Box 371980	When was the debt incurred?	
Pittsburgh, PA 15250 Number Street City State Zip Code Who incurred the debt? Check one	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and a	nother Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a cor	nmunity Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Verizon	Last 4 digits of account number	\$242.00
Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
c/o Vativ Recovery	When was the debt incurred?	
Solutions/Palisades P.O. Box 40728		
Houston, TX 77240		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one	e.	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and a	nother Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a cor	nmunity Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Telephone Bill	
Verizon	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name	When was the debt incurred?	
c/o AFNI, Inc. P.O. Box 3667	When was the debt incurred?	
Bloomington, IL 61702		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one	e.	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and a	·	
☐ Check if this claim is for a cor	_	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify

Debto	or 1 Kimberly E. Allen	Document Page 23 of 51 Case number (if known) 19-20912	
.2	Verizon Wireless	Last 4 digits of account number	\$242.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	c/o Portfolio Investments & Recovery	when was the debt incurred?	
	25 SE 2nd Avenue		
	Miami, FL 33131-1605		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Telephone Bill	
.2	Wasta Managament		Unknown
	Waste Management Nonpriority Creditor's Name	Last 4 digits of account number	Ulikilowii
	Bankruptcy Dept.	When was the debt incurred?	
	2625 W. Grandview Road, Suite 150		
	Phoenix, AZ 85023		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
.2	Waste Management Residential	Last 4 digits of account number	\$73.00
j	Nonpriority Creditor's Name		
	1001 Fannin Street, Suite 4000 Houston, TX 77002	When was the debt incurred? 2102	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	Contingent	
	☐ Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Garbage Collection Fees

Debtor 1 Kimberly E. Allen

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Case number (if known)

19-20912

Waste Management Residential	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 4836 Brecksville Road	When was the debt incurred?	
P.O. Box 523 Richfield, OH 44286	_	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
Total claims	01.	otaucht isans	01.	Ψ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	10,374.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	10,374.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor	mation to identify your	case:		
Debtor 1	Kimberly E. Allen	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA	
_	19-20912			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for				
2.1									
	Name								
	Number	Street			_				
	City		State	ZIP Code	<u> </u>				
2.2					_				
	Name								
	Number	Street							
	City		State	ZIP Code	_				
2.3	0.1.)		<u> </u>	2 0040					
	Name								
	Number	Street			_				
	City		State	ZIP Code	_				
2.4	0.1,		<u> </u>	2 0040					
	Name				_				
	Number	Street			<u> </u>				
	City		State	ZIP Code	<u> </u>				
2.5	- City		Ciaio	211 0000					
	Name				_				
	Number	Street			_				
	City		State	ZIP Code	<u> </u>				

		Docume	ent Page 26 o	ı <u>f 51</u>	
Fill in this	s information to identify your c	ase:			
Debtor 1	Kimberly E. Allen				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
	3,				
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case num	nber 19-20912				
(if known)					☐ Check if this is an
					amended filing
Officia	ll Form 106H				
_					
Sched	dule H: Your Code	ebtors			12/15
	e and case number (if known). you have any codebtors? (If you	• •		as a codebtor.	-
■ No					
☐ Ye					
	thin the last 8 years, have you ha, California, Idaho, Louisiana, I				tates and territories include
Alizui	ia, California, Idano, Louisiana, i	nevada, inew iviexico, Fu	erto Nico, Texas, Washi	ington, and wisconsin.)	
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spous	se, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only if	that person is a guaran	tor or cosigner. Make s	sure you have listed the	rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The credit	or to whom you owe the debt
	Name, Number, Street, City, State and ZIP	Code		Check all schedules t	hat apply:
3.1				☐ Schedule D, line	
3.1	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
<u> </u>	Name			_ ☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your ca	ase.				1				
	otor 1 Kimberly E.									
	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	WESTERN DISTRICT	Γ OF PENNSYLVANI	A						
_	se number 19-20912		-			_	if this is: amende	d filing		
									g postpetition ollowing date:	chapter
	fficial Form 106I					MM	1 / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. 11: Describe Employment Fill in your employment	r spouse is not filing w	ith you, do not inclu	de inforr	nati	on about y I case num	our spo nber (if l	use. If mo	ore space is	needed,
	information.								iiig spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed□ Not employed				■ Emplo	•		
		Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mor	thly Income								
	mate monthly income as of the dause unless you are separated.		you have nothing to re	eport for	any	line, write \$	60 in the	space. Inc	clude your nor	n-filing
•	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	mplo	oyers for th	at perso	n on the li	nes below. If y	you need
						For Debte	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0	0.00	\$	0.00	

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Debto	or 1	Kimberly E. Allen	•	Case	number (if known)	19-20912	
	0	va Para Albana	4		Debtor 1		g spouse
	Cop	by line 4 here	4.	\$	0.00	\$	0.00
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
	5e. 5f.	Insurance	5e. 5f.	\$ \$	0.00	\$ \$	0.00
	5g.	Domestic support obligations Union dues	5g.	\$ 	0.00	\$	0.00 0.00
	5h.	Other deductions. Specify:	5h.+	- :	0.00		0.00
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$ \$	0.00	\$	0.00
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _		\$	
			7.	Ψ	0.00	Ψ	0.00
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b.	\$ -	0.00	\$	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	232.00	\$	0.00
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00
	8e.	Social Security	8e.	\$	1,074.00	\$	0.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,306.00	\$	0.00
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		1,306.00 + \$	0.0	00 = \$ 1,306.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					
11.	Inclionation of the Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen			ed in <i>Sche</i> a	lule J. 1. +\$ 0.00
12.		It the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies					
13.	Do :	you expect an increase or decrease within the year after you file this form?	?				Combined monthly income
		No. Yes Explain:					

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	our case:						
	tor 1	Kimberly E.					eck if this is:		
1	otor 2 ouse, if filing)							nent show	wing postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	WESTE	RN DISTRICT OF PENNS	SYLVANIA		MM / DD /	YYYY	
1	e number 19	9-20912							
		rm 106J							
		J: Your I							12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.					
Par		ibe Your House	hold						
1.	Is this a joir								
	■ No. Go to	o line 2. e s Debtor 2 live i	in a conar	ata housahold?					
	□ res. Doe		iii a sepair	ate nousenoid:					
	= ::	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Depen- age	dent's	Does dependent live with you?
	Do not state								□ No
	dependents	names.							☐ Yes ☐ No
									☐ Yes
									□ No
									□ Yes □ No
									☐ Yes
3.	expenses of	penses include f people other tl d your depende	han $_{oldsymbol{\square}}$	No Yes					
Dor		ate Your Ongoi		y Evnances					
Est	imate your ex	cpenses as of yo	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the	value of such	h assistance and		government assistance i luded it on Schedule I: \				our exp	oneae
(Of	ficial Form 10	161.)						oui exp	enses
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$		0.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		rty, homeowner's				4b.	\$		0.00
		maintenance, re owner's associat	•	pkeep expenses		4c. 4d.	·		75.00
5.				ominium dues our residence, such as ho	me equity loans	4a. 5.			0.00 0.00

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Debtor 1 Kimberly	E. Allen	Case number (if known)	19-20912
11411141			
 Utilities: 6a. Electricity, h 	neat, natural gas	6a. \$	200.00
	er, garbage collection	6b. \$	40.00
	cell phone, Internet, satellite, and cable services	6c. \$	53.00
6d. Other. Spec	· · · · · · · · · · · · · · · · · · ·	6d. \$	
		7. \$	0.00
Food and housel		·	150.00
	ildren's education costs	8. \$	0.00
	y, and dry cleaning	9. \$	0.00
•	oducts and services	10. \$	0.00
. Medical and dent	•	11. \$	100.00
	nclude gas, maintenance, bus or train fare.	12. \$	100.00
Do not include car	, ,		
	lubs, recreation, newspapers, magazines, and books	13. \$	0.00
	butions and religious donations	14. \$	0.00
5. Insurance.	common deducated from common and to dead of the time of A and CO		
	urance deducted from your pay or included in lines 4 or 20.	150 °	00.00
15a. Life insuran		15a. \$	60.00
15b. Health insu		15b. \$	0.00
15c. Vehicle insu		15c. \$	100.00
15d. Other insura	· · ·	15d. \$	0.00
	lude taxes deducted from your pay or included in lines 4 or 20.		
Specify:		16. \$	0.00
 Installment or lea 			
17a. Car paymer		17a. \$	0.00
17b. Car paymer	nts for Vehicle 2	17b. \$	0.00
17c. Other. Spec	ify:	17c. \$	0.00
17d. Other. Spec	sify:	17d. \$	0.00
Your payments of	f alimony, maintenance, and support that you did not report a	<u> </u>	
deducted from yo	our pay on line 5, Schedule I, Your Income (Official Form 106I).	. 18. \$	0.00
. Other payments	you make to support others who do not live with you.	\$	0.00
Specify:		19.	
Other real proper	rty expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Your Income.	
20a. Mortgages	on other property	20a. \$	0.00
20b. Real estate	taxes	20b. \$	0.00
20c. Property, ho	omeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenanc	e, repair, and upkeep expenses	20d. \$	0.00
	r's association or condominium dues	20e. \$	0.00
Other: Specify:		21. +\$	0.00
. Other openiy.			0.00
. Calculate your m	onthly expenses		
22a. Add lines 4 th	nrough 21.	\$	878.00
22b. Copy line 22	(monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a	and 22b. The result is your monthly expenses.	\$ 	878.00
			070.00
3. Calculate your m			
23a. Copy line 12	2 (your combined monthly income) from Schedule I.	23a. \$	1,306.00
23b. Copy your r	nonthly expenses from line 22c above.	23b\$	878.00
	•		
23c. Subtract you	ur monthly expenses from your monthly income.		
	s your monthly net income.	23c. \$	428.00
	•		
4. Do you expect ar	n increase or decrease in your expenses within the year after y	ou file this form?	
For example, do you	expect to finish paying for your car loan within the year or do you expect you	ur mortgage payment to inc	rease or decrease because of
modification to the te	rms of your mortgage?		
■ No.			
ΠYes	Explain here:		

■ No.	
☐ Yes.	Explain here:

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Fill in this info	rmation to identify your	case:			
Debtor 1	Kimberly E. Allen	1			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	sankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case number	19-20912				
(if known)				-	k if this is an ided filing
ou must file th	is form whenever you fi	n connection with a bank	or amended schedules	rect information. . Making a false statement, concealir n fines up to \$250,000, or imprisonm	
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition F Declaration, and Signature (
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	d with this declaration and	
X /s/ Kir	mberly E. Allen		x		
Kimbe	erly E. Allen ure of Debtor 1		Signature of	Debtor 2	
Date	April 1, 2019		Date		

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	l in Abin i					
		nformation to identify you				
De	btor 1	Kimberly E. Alle	Middle Name	Last Name		
	btor 2					
(Sp	ouse if, filing) First Name	Middle Name	Last Name		
Un	ited State	s Bankruptcy Court for the	WESTERN DISTRICT C	OF PENNSYLVANIA		
Са	se numbe	er 19-20912				
(if k	nown)				_	Check if this is an
						amended filing
_						
O.	fficial	Form 107				
St	atemo	ent of Financial	Affairs for Indivi	duals Filing for I	Bankruptcy	4/16
					e equally responsible for su	
		If more space is needed nown). Answer every que		this form. On the top of a	ny additional pages, write yo	our name and case
		, , , , , , , , , , , , , , , , , , , ,		Lived Before		
Γá	rt 1: G	IVE DETAILS ADOUT FOUR M	arital Status and Where Yo	u Lived Before		
1.	What is	your current marital stat	us?			
	□ Ма	ırried				
	■ No	t married				
2.	Durina	the last 3 vears, have you	lived anywhere other than	where you live now?		
	_		,			
	■ No		lived in the leat 2 verse. De-	A in alcola cola ana con dico		
	⊔ re	s. List all of the places you	lived in the last 3 years. Do r	iot include where you live no	ow.	
	Debtor	1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
_						
3. stat	Within tees and te	t he last 8 years, did you e <i>rritories</i> include Arizona, Ca	ver live with a spouse or le alifornia, Idaho, Louisiana, No	e gal equivalent in a commu evada, New Mexico, Puerto l	inity property state or territo Rico, Texas, Washington and V	ry? (Community property Wisconsin.)
	_				-	,
	■ No		hadula H: Vour Codabtors (C	Official Form 106H)		
		s. Make sure you iiii out Sc	hedule H: Your Codebtors (C	Jiliciai Foitii 100H).		
Pa	rt 2 E	xplain the Sources of You	ur Income			
4	Did you	have any income from e	mployment or from operati	ng a husinoss during this	year or the two previous cale	andar voare?
٠.	Fill in th	e total amount of income yo	ou received from all jobs and	all businesses, including pa	rt-time activities.	silual years:
	If you ar	re filing a joint case and you	ı have income that you recei	ve together, list it only once t	under Debtor 1.	
	□ No					
	■ Ye	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
F۰	r laet cal	endar year:	=	,	□ Wogoo com:=:==:=:=	<i></i>
		to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$14,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
			- Operating a business		, 3	

Official Form 107

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Case number (if known) 19-20912 Document

Debtor 1 Kimberly E. Allen

				5.11		D.1.				
				Debtor 1		Debtor 2				
				Sources of income Check all that apply.	Gross income (before deductions a exclusions)	Sources of income of the check all that a				
		dar year be December		■ Wages, commissions, bonuses, tips	\$14,000	.00	missions,			
				☐ Operating a business		☐ Operating a	business			
5.	Include inc and other winnings.	come regard public benef If you are fili	less of whetl it payments; ng a joint cas	pensions; rental income; inter se and you have income that y	amples of other income est; dividends; money of ou received together, li	are alimony; child supp collected from lawsuits; st it only once under De				
	List each s	source and t	ne gross inco	ome from each source separa	tely. Do not include inco	ome that you listed in lin	e 4.			
	□ No									
	Yes.	Fill in the de	tails.							
				Debtor 1		Debtor 2				
				Sources of income Describe below.	Gross income from each source (before deductions a exclusions)	Describe below.				
				Alimony / Maintenance	\$8,400	.00				
		dar year be December		Alimony / Maintenance	\$8,400	.00				
Pa	rt 3: List	: Certain Pa	yments You	Made Before You Filed for	Bankruptcy					
6.	Are either No.	Neither De	ebtor 1 nor ['s debts primarily consumer Debtor 2 has primarily consumer a personal, family, or househol	ımer debts. Consumer	debts are defined in 11	U.S.C. § 101(8) as "incurred by an			
		During the	90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a	a total of \$6,425* or mor	re?			
		□ Yes	List below on paid that cr	each creditor to whom you pai editor. Do not include paymer	its for domestic support		ments and the total amount you ild support and alimony. Also, do			
		* Subject		payments to an attorney for the ton 4/01/19 and every 3 years		d on or after the date of	f adjustment.			
	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?									
		■ No.	Go to line 7	7.						
		☐ Yes	include pay	each creditor to whom you pai ments for domestic support o r this bankruptcy case.	•		you paid that creditor. Do not Also, do not include payments to an			

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Debtor 1 Kimberly E. Allen

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer	any property on a	ccount of a d	ebt that benefited an			
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name			
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No								
	Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case			
	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed,	foreclosed, garnis	hed, attached	d, seized, or levied?			
	No. Go to line 11.Yes. Fill in the information below.								
	Creditor Name and Address	Name and Address Describe the Property			Date Value of t				
		Explain what happened	I			property			
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fi	nancial institution	, set off any a	amounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date	Date action was Amo				
				taken	l				
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	sion of an assigne	e for the bend	efit of creditors, a			
Par	t 5: List Certain Gifts and Contributions								
	Within 2 years before you filed for bankrup	otcy, did you give any gift	s with a total value	of more than \$60	0 per person	?			
	■ No □ Yes. Fill in the details for each gift.								
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value			
	Person to Whom You Gave the Gift and Address:								

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Debtor 1 Kimberly E. Allen

14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.					
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value
Part 6: List Certain Losses						
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?					
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.			ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	3				
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.					
	□ No ■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Michael S. Geisler, Attorney-at-Law 201 Penn Center Blvd., Suite 524 Pittsburgh, PA 15235				2/1/2019	\$1,200.00
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made

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Case number (if known) 19-20912 Document Debtor 1 Kimberly E. Allen 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a **beneficiary?** (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Nο Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No П Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

Owner's Name

Address (Number, Street, City, State and ZIP Code)

Where is the property? (Number, Street, City, State and ZIP Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Kimberly E. Allen

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
		No						
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
25. Have you notified any governmental unit of any release of hazardous material?								
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	ronm	nental law? Include settlements a	nd orders.		
		No						
		Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the case	Status of the case		
Par	111-	Give Details About Your Business or	Connections to Any Business					
. «.	Part 11: Give Details About Your Business or Connections to Any Business							
27.								
27.	With	nin 4 years before you filed for bankrupt		-		business?		
27.	With	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	eithe	er full-time or part-time	business?		
27.	With		n a trade, profession, or other activity,	eithe	er full-time or part-time	business?		
27.	With	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	eithe	er full-time or part-time	business?		
27.	With	☐ A sole proprietor or self-employed in☐ A member of a limited liability comp.	n a trade, profession, or other activity, any (LLC) or limited liability partnershi	eithe	er full-time or part-time	business?		
27.	With	☐ A sole proprietor or self-employed in☐ A member of a limited liability compo	n a trade, profession, or other activity, any (LLC) or limited liability partnershi	eithe	er full-time or part-time	business?		
27.	With	☐ A sole proprietor or self-employed in ☐ A member of a limited liability comp. ☐ A partner in a partnership ☐ An officer, director, or managing exe	n a trade, profession, or other activity, any (LLC) or limited liability partnershi ecutive of a corporation g or equity securities of a corporation	eithe	er full-time or part-time	business?		
27.	With	 □ A sole proprietor or self-employed in □ A member of a limited liability comp □ A partner in a partnership □ An officer, director, or managing exe □ An owner of at least 5% of the voting 	n a trade, profession, or other activity, any (LLC) or limited liability partnershi ecutive of a corporation g or equity securities of a corporation art 12.	eithe	er full-time or part-time	business?		
27.	■ □ Bu:	☐ A sole proprietor or self-employed in ☐ A member of a limited liability comp. ☐ A partner in a partnership ☐ An officer, director, or managing exc. ☐ An owner of at least 5% of the voting. No. None of the above applies. Go to P Yes. Check all that apply above and fill siness Name	n a trade, profession, or other activity, any (LLC) or limited liability partnershi ecutive of a corporation g or equity securities of a corporation art 12.	eithe	er full-time or part-time LP) Employer Identification number			
27.	■ Bus Add	☐ A sole proprietor or self-employed in ☐ A member of a limited liability comp. ☐ A partner in a partnership ☐ An officer, director, or managing exe ☐ An owner of at least 5% of the voting No. None of the above applies. Go to P Yes. Check all that apply above and fill	n a trade, profession, or other activity, any (LLC) or limited liability partnershing or equity securities of a corporation art 12.	eithe	er full-time or part-time LP)			
27.	■ Bus Add	☐ A sole proprietor or self-employed in ☐ A member of a limited liability comp. ☐ A partner in a partnership ☐ An officer, director, or managing exe ☐ An owner of at least 5% of the voting No. None of the above applies. Go to P Yes. Check all that apply above and fill siness Name dress	n a trade, profession, or other activity, any (LLC) or limited liability partnership ecutive of a corporation or equity securities of a corporation part 12. in the details below for each business Describe the nature of the business	eithe	er full-time or part-time LP) Employer Identification number			
	Bu: Add (Nur	☐ A sole proprietor or self-employed in ☐ A member of a limited liability comp. ☐ A partner in a partnership ☐ An officer, director, or managing exe ☐ An owner of at least 5% of the voting No. None of the above applies. Go to P Yes. Check all that apply above and fill siness Name dress	n a trade, profession, or other activity, any (LLC) or limited liability partnershipecutive of a corporation or equity securities of a corporation part 12. In the details below for each business Describe the nature of the business Name of accountant or bookkeeper	eithe	er full-time or part-time LP) Employer Identification number Do not include Social Security r	number or ITIN.		
	Bu: Add (Nur	☐ A sole proprietor or self-employed in ☐ A member of a limited liability comp. ☐ A partner in a partnership ☐ An officer, director, or managing exe ☐ An owner of at least 5% of the voting. No. None of the above applies. Go to P Yes. Check all that apply above and fill siness Name dress nber, Street, City, State and ZIP Code) nin 2 years before you filed for bankrupton.	n a trade, profession, or other activity, any (LLC) or limited liability partnershipecutive of a corporation or equity securities of a corporation part 12. In the details below for each business Describe the nature of the business Name of accountant or bookkeeper	eithe	er full-time or part-time LP) Employer Identification number Do not include Social Security r	number or ITIN.		
	Bu: Add (Nur With	☐ A sole proprietor or self-employed in ☐ A member of a limited liability comp. ☐ A partner in a partnership ☐ An officer, director, or managing exe ☐ An owner of at least 5% of the voting. No. None of the above applies. Go to P Yes. Check all that apply above and fill siness Name dress nber, Street, City, State and ZIP Code) nin 2 years before you filed for bankrupte itutions, creditors, or other parties.	n a trade, profession, or other activity, any (LLC) or limited liability partnershipecutive of a corporation or equity securities of a corporation part 12. In the details below for each business Describe the nature of the business Name of accountant or bookkeeper	eithe	er full-time or part-time LP) Employer Identification number Do not include Social Security r	number or ITIN.		
	Bu: Add (Nur With inst	□ A sole proprietor or self-employed in □ A member of a limited liability comp. □ A partner in a partnership □ An officer, director, or managing exe □ An owner of at least 5% of the voting. No. None of the above applies. Go to P Yes. Check all that apply above and fill siness Name dress name dress name, Street, City, State and ZIP Code) nin 2 years before you filed for bankrupte itutions, creditors, or other parties. No Yes. Fill in the details below.	n a trade, profession, or other activity, any (LLC) or limited liability partnershipecutive of a corporation or equity securities of a corporation part 12. In the details below for each business Describe the nature of the business Name of accountant or bookkeeper	eithe	er full-time or part-time LP) Employer Identification number Do not include Social Security r	number or ITIN.		

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Debtor 1 Kimberly E. Allen

Part 12: Sign Below		
are true and correct. I understand	Statement of Financial Affairs and any attachments, and I declare under penalt of that making a false statement, concealing property, or obtaining money or p t in fines up to \$250,000, or imprisonment for up to 20 years, or both. 3571.	
/s/ Kimberly E. Allen		
Kimberly E. Allen	Signature of Debtor 2	
Signature of Debtor 1		
Date April 1, 2019	Date	
Did you attach additional pages	o Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Of	fficial Form 107)?
■ No		
☐ Yes		
Did you pay or agree to pay som	eone who is not an attorney to help you fill out bankruptcy forms?	
■ No		
☐ Yes. Name of Person . A	ttach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official	l Form 119).

Fill in this information to identify your case:							
Debtor 1	Kimberly E. Allen						
Debtor 2 (Spouse, if filing)							
United States E	Bankruptcy Court for the: Western District of Pennsylvania						
Case number (if known)	19-20912						

Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:									
 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). 									
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).									
3. The commitment period is 3 years.									
☐ 4. The commitment period is 5 years.									
—									

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

	Part	1: Calculate Your Average Monthly Income							
	1.	What is your marital and filing status? Check one of	only.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11	-						
	10 th	II in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6-e 6 months, add the income for all 6 months and divide the tot louses own the same rental property, put the income from that	month pa	eriod would Fill in the re	l be March 1 th sult. Do not inc	rough Aug lude any ir	ust 31. If the ame acome amount m	ount of your monthly incon nore than once. For examp	ne varied during le, if both
						Colum Debto		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and c	ommissio	ons (before a	s	0.00	\$	
	3.	Alimony and maintenance payments. Do not include Column B is filled in.	e paym	ents from	a spouse if	\$	232.00	\$	
	4.	All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Do not include payments from a spot you listed on line 3.	rt. Inclu	de regulaı depende	r contribution nts, parents,		0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debto	or 1					
l		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	-\$	0.00					
l		Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here	-> \$	0.00	\$	
	6.	Net income from rental and other real property	Debto						
		Gross receipts (before all deductions)	\$ _	0.00					
		Ordinary and necessary operating expenses	- \$ _	0.00		_		•	
1		Net monthly income from rental or other real property	Ф	0.00	Copy here	-> S	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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19-20912

Case number (if known)

Kimberly E. Allen Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below 0.00 0.00 \$ 0.00 Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for 232.00 232.00 \$ \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 232.00 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 232.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 232.00 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 2.784.00 15b. The result is your current monthly income for the year for this part of the form.

Debtor 1

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Kimberly E. Allen 19-20912 Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. РΔ 16b. Fill in the number of people in your household. 1 53.803.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17a Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 232.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 232.00 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 232.00 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 2,784.00 20b. The result is your current monthly income for the year for this part of the form \$ 53,803.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Kimberly E. Allen Kimberly E. Allen Signature of Debtor 1 Date April 1, 2019

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

If you checked 17a, do NOT fill out or file Form 122C-2.

MM / DD / YYYY

Debtor 1 Kimberly E. Allen Case number (if known) 19-20912

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2018 to 02/28/2019.

Line 3 - Alimony and maintenance payments received

Source of Income: Alimony

Income by Month:

6 Months Ago:	09/2018	\$232.00
5 Months Ago:	10/2018	\$232.00
4 Months Ago:	11/2018	\$232.00
3 Months Ago:	12/2018	\$232.00
2 Months Ago:	01/2019	\$232.00
Last Month:	02/2019	\$232.00
	Average per month:	\$232.00

Non-CMI - Social Security Act Income

Source of Income: **SS** Income by Month:

income by wionin.		
6 Months Ago:	09/2018	\$1,074.00
5 Months Ago:	10/2018	\$1,074.00
4 Months Ago:	11/2018	\$1,074.00
3 Months Ago:	12/2018	\$1,074.00
2 Months Ago:	01/2019	\$1,074.00
Last Month:	02/2019	\$1,074.00
	Average per month:	\$1,074.00

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7 :	Liquidation	
(\$245	filing fee	
	\$75	administrative fee	
+	\$15	trustee surcharge	
(335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-20912-GLT Doc 18 Filed 04/01/19 Entered 04/01/19 14:09:22 Desc Main Document Page 47 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In re	e Kimberly E. Allen		Case No.	19-20912
	-	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	BTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		<u> </u>	4,000.00
	Prior to the filing of this statement I have received		\$	1,200.00
	Balance Due		\$	2,800.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are memb	ers and associates of my law firm
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspec	ts of the bankruptcy ca	ase, including:
	a. [Other provisions as needed] Debtor(s) counsel reserves the right to ap retainer. Debtor(s) counsel bills at the rate.		payment of fees ea	rned in excess of the
6.	By agreement with the debtor(s), the above-disclosed fee d	oes not include the following	g service:	
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any abankruptcy proceeding.	greement or arrangement for	r payment to me for re	presentation of the debtor(s) in
A	April 1, 2019	/s/ Michael S. Ge		
I	Date	Michael S. Geisle Signature of Attorne		
		MICHAEL S. GEI		
		Attorney-at-Law	Dhad Oalta 504	
		201 Penn Center Pittsburgh, PA 1		
		(412) 613-2133 F	ax: (412) 372-2513	
		m.s.geisler@att.ı		
		Name of law firm		

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United States Bankruptcy Court Western District of Pennsylvania

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In re	Kimberly E. Allen		Case No.	19-20912	
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX

V L 3	difference of eneblion within	
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.		
Date: April 1, 2019	/s/ Kimberly E. Allen Kimberly E. Allen	
	Signature of Debtor	

AES/PHEAA P.O. Box 8147 Harrisburg, PA 17105

American Express c/o Becket and Lee, LLP P.O. Box 3001 Malvern, PA 19355-0701

American Home Patient P.O. Box 927161 Philadelphia, PA 19182

American InfoSource LP as agent for Verizon P.O. Box 248838 Oklahoma City, OK 73124-8838

BYL Collection Service, LLC 301 Lacey Street West Chester, PA 19382

Commonwealth of Pennsylvania Office of Attorney General Collections Unit 14th Floor, Strawberry Square Harrisburg, PA 17120

Credit Acceptance Corporation 25505 West 12 Mile Road, Suite 3000 Southfield, MI 48034

Credit Acceptance Corporation 25505 West Twelve Mile Rd Suite 3000 Southfield, MI 48034

Duquesne Light Company c/o Bernstein-Burkley, P.C., 707 Grant Street, Suite 2200, Gulf Tower Pittsburgh, PA 15219

Duquesne Light Company 411 Seventh Avenue Pittsburgh, PA 15230

ECMC PO Box 16478 St Paul, MN 55116-0478

Green Tree Servicing, LLC P.O. Box 0049 Palatine, IL 60055-0049

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Invision Human Services 12450 Perry Highway Wexford, PA 15090

PA Housing Finance Agency 211 North Front Street Harrisburg, PA 17105

Pa. Housing Finance Agency Attn: Anne C. Klitsch P.O. Box 15057 Harrisburg, PA 17105-5057

Pennsylvania Department of Revenue Bankruptcy Division PO Box 280946 Harrisburg, PA 17128-0946

Peoples Natural Gas P.O. Box 644760 Pittsburgh, PA 15264

Peoples Natural Gas Attn: Cash Management Dept. 375 North Shore Drive, Suite 600 Pittsburgh, PA 15212

Pittsburgh Water & Sewer Authority c/o Goehring Rutter & Boehm 437 Grant Street, 14th Floor Pittsburgh, PA 15219

Portfolio Investments II LLC c/o Recovery Management Systems Corp. 25 SE 2nd Avenue, Suite 1120 Miami, FL 33161-1605

Shop NBC 6740 Shady Oak Road Solon, OH 44139

The Law Offices of Gregory Javardian 1310 Industrial Boulevard First Floor, Suite 101 Southampton, PA 18966

UPMC Community Medicine, Inc. P.O. Box 382046 Pittsburgh, PA 15250-8046

UPMC Magee Womens Hospital 2 Hot Metal Street Pittsburgh, PA 15203

UPMC Physician Service 1650 Metropolitan Street, 3rd Floor Pittsburgh, PA 15233

UPMC Physician Services P.O. Box 371980 Pittsburgh, PA 15250

Verizon c/o Vativ Recovery Solutions/Palisades P.O. Box 40728 Houston, TX 77240

Verizon c/o AFNI, Inc. P.O. Box 3667 Bloomington, IL 61702

Verizon Wireless c/o Portfolio Investments & Recovery 25 SE 2nd Avenue Miami, FL 33131-1605

Washington County Tax Claim Bureau 100 West Beau Street Suite 205 Washington, PA 15301

Waste Management Bankruptcy Dept. 2625 W. Grandview Road, Suite 150 Phoenix, AZ 85023

Waste Management Residential 1001 Fannin Street, Suite 4000 Houston, TX 77002

Waste Management Residential 4836 Brecksville Road P.O. Box 523 Richfield, OH 44286